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CONFIRMATION NO. 8272

<b>SERIAL NUMBER</b> 10/733,135	<b>FILING OR 371(c) DATE</b> 12/11/2003 <b>RULE</b>	<b>CLASS</b> 800	<b>GROUP ART UNIT</b> 1638	<b>ATTORNEY DOCKET NO.</b> P00245US17
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/816,846 03/23/2001 ABN which is a CON of 09/593,908 06/14/2000 ABN  
 which is a CON of 09/111,330 07/07/1998 PAT 6,136,320  
 which is a CON of 08/479,742 06/07/1995 PAT 5,914,123 \*  
 which is a DIV of 08/026,393 03/04/1993 PAT 5,612,487  
 which is a CIP of 07/750,049 08/26/1991 ABN  
 (\*)Data provided by applicant is not consistent with PTO records.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*

\*\* 03/17/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 11	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

22885

## TITLE

Vaccines expressed in plants

<b>FILING FEE RECEIVED</b> 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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